

## CITY OF LOUDON BOARD OF ZONING APPEALS REQUEST APPLICATION

101 Mulberry Street, Suite 101 • Loudon, TN 37774

Receipt No	\$100.00 No	\$100.00 Non-Refundable Fee		
Verified By(initials)	Case No			
Date Received				
Name of Applicant		Address of Applicant		
Home Phone	y T/S ESCYCLES NO SOCIO PROGRAMA CARRAMONO AND ANTICONO	Work Phone		
Applicant is: (Circle One) Ow	rner Age	ent		
Address of Property	Тах Мар	Parcel No.	Zoning District	
Type of request:				
Explain the circumstances warrantin  In making this request the applicant of true and accurate. The applicant cert variance/special exception for this promisstatement or misrepresentation of sufficient grounds for denial of this recommendation.	g the need for a sertifies that the in ifies that he/she haperty. It is undersfact, either with o	formation given is, to as the legal authority stood and agreed by t	Sideyard Rearyard Lot size Medical Hardship Ince request: the best of his/her knowledge, to request consideration of the he applicant that any error,	
5	· Signature of Owne	er		
	Dat	****		
Signature of A	Applicant (if differe	nt)	***************************************	
BC	ARD OF ZONING	APPEALS ACTION		
Date Petition Heard:				
Approved:	Approved Subject	to Conditions:		
Denied:	Reason Denied:			
	Chair	man, Board of Zonin	q Appeals 101	